				VOIC		
CAMPAIO LOCAL COM						
Is This Report an Amendment:  Yes No				APP & S FICE USE ONLY		
Instructions for completing schedules are on the b	ack of each schedule.			FITCHIO		
COMMITTEE IDENTIFICATION				APP . DURG		
Name of Committee FRIENDS OF MATTHEW D JONES			D	4 B		
Street Address  5/57 F CHERYL PKWY # 101			OF	FICE USE ONLY		
515Z E CHERYL PKWY # 101  City, State and Zip Code  FITCHBURG, WI 53711						
Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form.						
NAME OF REPORT						
January Continuing Pre-Primary  July Continuing 19  September Continuing 19  Pre-Election	Spring F	Fall  S	Special	Termination Report also complete Schedule 4		
SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Colum Calen	ndar			
1. RECEIPTS		Year-To	o-Date			
1A. Contributions (Including Loans) from Individuals	\$ 0	\$ 262	6.24	0		
1B. Contributions from Committees (Transfers-In)	\$	\$ 150	0.00	D		
1C. Other Income and Commercial Loans	\$	\$				
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ \$\sigma	\$ 277	6.24	0		
2. DISBURSEMENTS						
2A. Gross Expenditures	\$ 246.07	8 292	6.24	0		
2B. Contributions to Committees (Transfers-Out)	\$	\$				
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 746.07	\$ 295	26.24	D		
CASH SUMMARY						
Cash Balance Beginning of Report	\$ 246.07					
Total Receipts	\$ + 0-	V				
Subtotal	\$ 246.07	V.				
Total Disbursements	\$ - 246.07	V ,				
CASH BALANCE END OF REPORT	\$ 00.0					
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$					
LOANS (Balance at the Close of This Period-3B)	\$	i i				
I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.						
722	ignature of Candidate on Treasurer Date: 4/16/2021					
Matthew D Jones	Email motthew Dee J	matthew Dee Jours & angil Daytime Phone: 414. 477-809				

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0504, 11.0504, 11.0604, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.

SCHEDULE 2-A	
SOIIEDULE 2-A	

## DISBURSEMENTS Gross Expenditures

Page \_\_\_ of \_\_\_

Complete Commi	HOS OF MATTHEW DJONES		
Instructions for	completing schedules are on the back of each schedule.	······································	
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
7/19/19	Matthew D. Jones 770 SKOKIE Blud. #454 NorTHBROOK/16 6006Z Check if: 1 In-Kind Offset	Close campagn account & Repay loan made to Self.	246.07
	Check if: □ In-Kind Offset		
	Check if: □ In-Kind Offset		
	CHECK II. IT III-TANIO ONSEL		
	Check if:		7:// 57
	, 246.07		
	\$ 276.01		
		TOTAL UNITEMIZED EXPENDITURES	246.07
		TOTAL EXPENDITURES	\$ .0 1